

MULTIPLE IDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-879)						SERIAL NO 107070453		FILING DATE			
						APPLICANT(S)					
						CLAIMS					
LED		1st AMENDMENT		AFTER 2nd AMENDMENT							
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	3	3	3	3	3						
TOTAL DEP.	10	22	22	22	22						
TOTAL CLAIMS	13	25	25	25	25						

MAY BE USED FOR ADDITIONAL CLAIMS OR ADVERTISEMENTS

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